2020 TINY TOTS T-BALL ENTRY FORM

Date_____

Registration Jan. -Mar. 6

NAME AGE(As of 5-1-20) DATE OF BIRTH

PARENT'S NAME (Both) (Home) TELEPHONE (work) (Cell) (Text)

ADDRESS CITY ZIP TEAM ON LAST YEAR

_____

Kindergarten, Day care, school attending email address

WOULD YOU LIKE TO BE A COACH? _____
(Head coach for first child half price $22.50)

PAID $ 45.00 (Cash or check) RECEIPT NO.

Payable to: Brookhaven Recreation Dept.

CIRCLE ONE:

BOY OR GIRL

SHIRT SIZE:

YOUTH X-SMALL
YOUTH SMALL
YOUTH MEDIUM

Tiny Tots T-Ball for ages 3 & 4.
Must be age 3 by May 1, 2020 and not age 5 before May 1, 2020.

OVER

RELEASE BY PARENT OR GUARDIAN

I _____, AM THE NATURAL PARENT AND/OR
PARENT
GUARDIAN OF THE MINOR CHILD _____ WHOSE

BIRTHDAY IS child _____.
BIRTHDAY
BY VIRTUE OF AND IN CONSIDERATION OF THE CITY OF BROOKHAVEN

AND ITS DEPARTMENT OF RECREATION ALLOWING MY MINOR CHILD TO

PARTICIPATE IN THE FOLLOWING RECREATIONAL ACTIVITY, TO-WIT:

T-BALL

I DO HEREBY, ON BEHALF ON MY MINOR CHILD, RELEASE SAID CITY AND

DEPARTMENT FROM ANY RESPONSIBILITY FOR ANY HARM OR INJURY,

(OR ANY LIABILITY WHICH MAY RESULT THEREFROM) WHICH SAID CHILD

MAY EXPERIENCE OR SUFFER FROM WHILE PARTICIPATING IN OR

ATTENDING A RECREATIONAL ACTIVITY SPONSORED, OPERATED OR

CREATED BY SAID CITY AND DEPARTMENT. I FURTHER RECOGNIZE AND

ACKNOWLEDGE THAT THE SAID CITY AND DEPARTMENT WILL PROVIDE

NO HEALTH AND ACCIDENT INSURANCE FOR MY CHILD TO COVER MY

CHILD FROM BODILY INJURY HE/SHE MAY SUFFER WHILE PARTICIPATING

IN THE CITY AND DEPARTMENT RECREATIONAL ACTIVITIES. THE

RECREATION DEPARTMENT HAS PERMISSION TO USE ANY PHOTOGRAPHY

TAKEN FOR PUBLICITY PURPOSES. I HAVE READ AND UNDERSTOOD THE

ABOVE RELEASE AND AGREE TO ITS TERMS.

SIGNED _____

DATE _____